IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)	:	Tomohisa Shiga et al.
Serial No.	:	09/431,437
For	:	ELECTRONIC PROGRAM GUIDE SYSTEM USING IMAGES OF REDUCED SIZE TO IDENTIFY RESPECTIVE PROGRAMS
Filed	:	November 1, 1999
Examiner	:	Unknown
Art Unit	:	2711

745 Fifth Avenue
New York, NY 10151

EXPRESS MAIL

Mailing Label Number: EL585028164US

Date of Deposit: August 15, 2000

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, DC 20231.

Edward Na
(Typed or printed name of person mailing paper or fee)

[signature]
(Signature of person mailing paper or fee)

PRELIMINARY AMENDMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Before the issuance of the first Office Action, please amend the above-identified application as follows:

-1-   PAD5611

8-16-00

GP 2711

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ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

     Transmitted herewith is an amendment in the above-identified application.

   __   No additional fee is required.

   X   The fee has been calculated as shown below.

   __   This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	60	Minus	20 =	40 ×	$18(9)	= $720.00
Independent claims	7	Minus	3 =	4 ×	$78(39)	= 312.00
			Total additional fee for this amendment			$1,032.00

*   If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
**   If the highest number of total claims previously paid for is less than 20, write "20" in this space.
***   If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

   __   This application contains a multiple dependent claim. The required fee of $260 ($130) has been previously paid _, or is paid herewith _.

   __   This response is being filed within the _ first month, _ second month, _ third month, _ fourth month following the expiration of the term originally set therefor, and the fee of _ $110 ($55), _ $380 ($190), __ $870 ($435), _ $1,360 ($680) for the requisite extension is due and _ paid herewith.

   X   A check in the amount of $1,032.00 is attached.

   _   Charge $_ to Deposit Account No. 50-0320.

   X   Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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Edward Nay
Typed or Printed Name of Person Mailing Paper or Fee

(signature)
Signature of Person Mailing Paper or Fee

FROMMER LAWRENCE & HAUG, LLP
Attorneys for Applicant(s)

(signature)

By: Bruno Polito
   Reg. No. 38,580
   Tel. (212) 588-0800

PAD6418